

Supplemental Application Data Sheet

Application Information

Application Number:: 10/568728
Filing Date:: 02/17/2006
Application Type:: Regular
Subject Matter:: Utility
Title:: PLASTIC BRACHYTHERAPY SOURCES
Attorney Docket Number:: IBT1.073-US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 6
Total Drawing Sheets:: 5
Small Entity?:: Yes
Petition Included?:: No
Secrecy Order in Parent Appl?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: John
Middle Name:: L.
Family Name:: Russell
Name Suffix:: Jr.
City of Residence:: Canton
State or Province of Residence:: GA
Street of mailing address:: 6000 Live Oak Parkway
City of mailing address:: Norcross
State or Province of mailing address:: GA
Postal or Zip Code of mailing address:: 30093
Applicant Authority type:: Inventor
Primary Citizenship Country:: US

Status::	Full Capacity
Given Name::	John
Middle Name::	L.
Family Name::	Carden
Suffix::	Jr.
City of Residence::	Brussels
Country of Residence::	Belgium
Street of mailing address::	Zone Industrielle C
City of mailing address::	Seneffe
Country of mailing address::	Belgium
Postal or Zip Code of mailing address::	7180
<u>Applicant Authority type::</u>	Inventor
<u>Primary Citizenship Country::</u>	US
Status::	Full Capacity
Given Name::	Roy
Family Name::	Coniglione
City of Residence::	Alpharetta
State or Province of Residence::	GA
Street of mailing address::	5435 <u>Heathridge Terrace</u>
City of mailing address::	Duluth
State of Province of mailing Address::	GA
Postal or Zip Code of mailing address::	30097
<u>Applicant Authority type::</u>	<u>Inventor</u>
<u>Primary Citizenship Country::</u>	<u>Belgium</u>
<u>Status::</u>	<u>Full Capacity</u>
<u>Given Name::</u>	<u>Dominique</u>
<u>Family Name::</u>	<u>Moyaux</u>
<u>City of Residence::</u>	<u>Brussels</u>
<u>Country of Residence::</u>	<u>Belgium</u>
<u>Street of mailing address::</u>	<u>Zone Industrielle C</u>
<u>City of mailing address::</u>	<u>Seneffe</u>
<u>Country of mailing address::</u>	<u>Belgium</u>
<u>Postal or Zip Code of mailing address::</u>	<u>7180</u>

Correspondence Information

Correspondence Customer Number:: 003775

Representative Information

Representative Customer Number:: 003775

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 USC 119(e)	60/496,474	08/20/03
This application	National Stage of	PCT/US04/027116	08/20/04

Foreign Priority Information**Assignment Information**

Assignee name:: International Brachytherapy, s.a.
City of mailing address:: 7180 Seneffe
Country of mailing address:: Belgium